

CIVIL COMPLAINT FORM TO BE USED BY A *PRO SE* PRISONERIN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

Phazon M. Bolton KT-6256
Full Name of Plaintiff Inmate Number

v.

Civil No. _____
(to be filled in by the Clerk's Office)

SGT. Stamm
Name of Defendant 1

☐ Demand for Jury Trial

☐ No Jury Trial Demand.

G.O. Kimmel
Name of Defendant 2

L.T. John Doe
Name of Defendant 3

Name of Defendant 4

Name of Defendant 5
(Print the names of all defendants. If the names of all
defendants do not fit in this space, you may attach
additional pages. Do not include addresses in this
section).

FILED
HARRISBURG, PA

JUN 24 2021

PER IM
DEPUTY CLERK

I. NATURE OF COMPLAINT

Indicate below the federal legal basis for your claim, if known.

- ☒ Civil Rights Action under 42 U.S.C. § 1983 (state, county, or municipal defendants)
- ____ Civil Rights Action under Bivens v. Six Unknown Federal Narcotics Agents, 403 U.S. 388
(1971) (federal defendants)
- ____ Negligence Action under the Federal Tort Claims Act (FTCA), 28 U.S.C. § 1346, against the
United States

II. ADDRESSES AND INFORMATION

A. PLAINTIFF

Bolton Phazon Martel

Name (Last, First, MI)

KT-6256

Inmate Number

SCI Coal Township

Place of Confinement

1 Kelly Drive

Address

Coal Township, PA, 17866

City, County, State, Zip Code

Indicate whether you are a prisoner or other confined person as follows:

- ☐ Pretrial detainee
- ☐ Civilly committed detainee
- ☐ Immigration detainee
- ☒ Convicted and sentenced state prisoner
- ☐ Convicted and sentenced federal prisoner

B. DEFENDANT(S)

Provide the information below for each defendant. Attach additional pages if needed.

Make sure that the defendant(s) listed below are identical to those contained in the caption. If incorrect information is provided, it could result in the delay or prevention of service of the complaint.

Defendant 1:

Stamm

Name (Last, First)

Sergeant

Current Job Title

~~Sergeant~~ SCI Coal Township 1 Kelly Dr.

Current Work Address

Coal Township, PA, 17866

City, County, State, Zip Code

Defendant 2:

Kimmel

Name (Last, First)

C.O. | Corrections Officer

Current Job Title

SCI Coal Township 1 Kelly Dr.

Current Work Address

Coal Township, PA, 17866

City, County, State, Zip Code

Defendant 3:

John Doe

Name (Last, First)

Lutident

Current Job Title

SCI Coal Township

Current Work Address

1 Kelly Drive, Coal Township, PA, 17866

City, County, State, Zip Code

Defendant 4:

Name (Last, First)

Current Job Title

Current Work Address

City, County, State, Zip Code

Defendant 5:

Name (Last, First)

Current Job Title

Current Work Address

City, County, State, Zip Code

III. Statement of Facts

G. and a L.T. rush in the room and just look at me before I passed out. I don't remember much after that but being rushed to the hospital. I was hospitalized for (5) Five days before returned to the prison.

III. STATEMENT OF FACTS

State only the facts of your claim below. Include all the facts you consider important. Attach additional pages if needed.

A. Describe where and when the events giving rise to your claim(s) arose.

In SCI Coal Township's BHU - POC holding Cage

B. On what date did the events giving rise to your claim(s) occur?

The incident happen on 10/01/2020

C. What are the facts underlying your claim(s)? (For example: What happened to you?
Who did what?)

I was removed from my cell in the BHU pod 2 Cell 7 after reporting suicidal thoughts. To the POC holding cage, I was escorted to the POC cage by SGT. Stamm, L.T. "John Doe" and I thank (4) Four Corrections Officers unsure of who they are, one of them had the camera. While in the cage psychology specialist Ms. Michelle Bless and GPS worker inmate "John Doe" comes in to the room where I was held and the inmate starts telling me (im acting out for no reason and I know what I did to come to prison) This went on until I yell at them to leave me alone and they both left the room. From that point, SGT. Stamm is standing outside the room as im venting to myself and tells me to "shut the fuck up" and kill myself we dont care. I told him to shut up and leave me alone, again he tells me to kill myself before he does and closes the door. As I take off my shirt and starts to rip in C.O. Kimmel is outside the door with Stamm telling me I dont have the ball to do it and im not built like that. I took my shirt tied them on the bars above the cage wrapped it around my neck and hung myself. I seen officers

IV. LEGAL CLAIM(S)

You are not required to make legal argument or cite any cases or statutes. However, state what constitutional rights, statutes, or laws you believe were violated by the above actions. If you intend to assert multiple claims, number and set forth each claim in separate paragraphs. Attach additional pages if needed.

I believe my following Constitutional Right and Laws were Violated
1) ~~The~~ Eighth Amendment right, protection From Physical Brutality,
Cruel and Unusual Punishment, Serious Medical Need, Deliberate
Indifference,

2) Fourteenth Amendment, The Due Process of state Law

3) Action under color of Federal Law

4) Action under color of State Law

5) Intentional Torts, Assault and Battery

V. INJURY

Describe with specificity what injury, harm, or damages you suffered because of the events described above.

Laceration to top left of my head above forehead, Swollen on my
Face in eyes, lips and lumps on forehead. Fear of my life & wellbeing

VI. RELIEF

State exactly what you want the court to do for you. For example, you may be seeking money damages, you may want the court to order a defendant to do something or stop doing something, or you may be seeking both types of relief. If you are seeking monetary relief, state your request generally. Do not request a specific amount of money.


Im requesting the following, Compensatory damages, Punitive
damages and conviction. Transfer in Fear of my life by staff.

VII. SIGNATURE

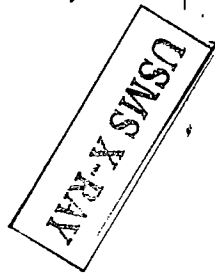
By signing this complaint, you represent to the court that the facts alleged are true to the best of your knowledge and are supported by evidence, that those facts show a violation of law, and that you are not filing this complaint to harass another person or for any other improper purpose.

Local Rule of Court 83.18 requires *pro se* plaintiffs to keep the court informed of their current address. If your address changes while your lawsuit is being litigated, you must immediately inform the court of the change in writing. By signing and submitting the complaint form, you agree to provide the Clerk's Office with any changes to your address where case-related papers may be served, and you acknowledge that your failure to keep a current address on file with the Clerk's Office may result in dismissal of your case.


Signature of Plaintiff


Date

Phazon Bolton KT-6256
SCI Coal Township
1 Kelley Drive
Coal Township PA, 17866



INMATE MAIL
PA DEPT OF
CORRECTIONS



U.S. POSTAGE
ZIP 17866
02 471
\$ 001.40⁰
0000365961 JUN 23 2021

Mr. Peter Welsh
United State District Court
Middle District of Pennsylvania
U.S. Courthouse
228 Walnut Street
P.O. Box 983
Harrisburg, PA, 17108

RECEIVED
HARRISBURG, PA
JUN 24 2021

PER _____
DEPUTY CLERK